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## APPLICANTS

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## \*\* CONTINUING DATA \*\*\*\*\*

T.H. None

## \*\* FOREIGN APPLICATIONS \*\*\*\*\*

T.H. None

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* SMALL ENTITY \*\*

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Foreign Priority claimed 35 USC 119 (a-d) conditions met Verified and Acknowledged	<input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Examiner's Signature <u>T.H.</u> Initials <u>T.H.</u>	STATE OR COUNTRY RI	SHEETS DRAWING 6	TOTAL CLAIMS 39	INDEPENDENT CLAIMS 2
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## TITLE

MICROSTRIP TRANSITION AND NETWORK

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